附件

参会回执

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **姓名** |  | **性别** |  | **职称** |  |
| **民族** |  | **年龄** |  | **电话** |  |
| **单位** |  | | | | |
| **地址** |  | | | **邮编** |  |
| **备注** |  | | | | |